

Work Order ID 99775

April-11-13 3:34:52 PM

\*99775\*

Page 1

Item ID: 646.3911

Accept

\*N900040100\*

Setup Start

\*NS1\*

Revision ID:

Item Name: Shim

Stop

\*NS2\*

Start Date: 5/24/13 Start Qty: 10.00

\*10\*

Cust Item ID:

Required Date: 5/24/13 Req'd Qty: 10.00

\*10\*

Customer:

Reference:

Approvals: Process Plan: MLO

Date: 13-04-16

Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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646.3900	N/C
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110	0.00
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\*110\*

Waterjet

Memo

0.00

12 0 Jm3-4-19

FLOW CNC Waterjet

C1095 Blue Spring Steel  
.032

1-Cut as per Dwg

Dwg Rev: N/C

Prog Rev: N/C

2-Deburr if necessary

120	QC2- Inspect parts off machine FAI/FAIB	0.00
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\*120\*

QC

Memo

0.00

12 0 Jm3-4-19

Quality Control

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending		Bend		Grain		Ovalized		Pressure/Forced			
Centre Not Concentric to O/S		BOM/Route		Hardware		Over/Under tolerance		Temperature/Cure			
Cracks		Broken/Damaged		Inspection Incomplete		Part Incorrect		Weld			
Crushed/Crimped.		Burrs		Instructions Incomplete/Unclear		Part Lost/Missing		Wrong Stock Pulled			
Cuffs		Contamination		Maintenance		Part Moved					
Heat Treat		Countersink		Mislabeled		Positioned Wrong					
Inspection Strip in Tube		Cut Too Short		Misread		Power Loss/Surge		Other			
Ripples in Bend		Drill Holes		Offset							
Torque Waves in Extrusion		Drawing		Out of Calibration							
Turning Sequence		Finish		Out of Sequence							
Wave/Twist in Tube		Folio		Outside Dimensions							

Work Order ID 99775

April-11-13 3:34:52 PM

\*99775\*

Page 2

Item ID: 646.3911

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Shim

Stop

\*NS2\*

Start Date: 5/24/13 Start Qty: 10.00

\*10\*

Cust Item ID:

Required Date: 5/24/13 Req'd Qty: 10.00

\*10\*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

\*130\*

QC

Quality Control

QC8- Inspect parts - second check

0.00

DAS  
27

10

13 4 19

140

Outsource process-Cadplate per QSI017 4.1.9.1

0.00

\*140\*

Outsource3

Outsource process - Cad plate

Memo

Issue P/O: 19639

0.00

11/13-04-19

150

Receive & Inspect for Damage & Mat'l Certs

0.00

\*150\*

Packaging

Packaging

Memo

0.00

11/13-07-21 02

NCR: Yes / No

DQA: Date:

# WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Date:

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
				Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
				Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
				Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending				Bend		Grain			Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>	
Centre Not Concentric to O/S				BOM/Route		Hardware			Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>	
Cracks				Broken/Damaged		Inspection Incomplete			Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>	
Crushed/Crimped.				Burr		Instructions Incomplete/Unclear			Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>	
Cuffs				Contamination		Maintenance			Part Moved <input type="checkbox"/>		
Heat Treat				Countersink		Mislabeled			Positioned Wrong <input type="checkbox"/>		
Inspection Strip in Tube				Cut Too Short		Misread			Power Loss/Surge <input type="checkbox"/>		
Ripples in Bend				Drill Holes		Offset				Other <input type="checkbox"/>	
Torque Waves in Extrusion				Drawing		Out of Calibration					
Turning Sequence				Finish		Out of Sequence					
Wave/Twist in Tube				Folio		Outside Dimensions					

Work Order ID 99775

April-11-13 3:34:52 PM

\*99775\*

Page 3

Item ID: 646.3911

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Shim

Start Date: 5/24/13 Start Qty: 10.00

\*10\*

Cust Item ID:

Required Date: 5/24/13 Req'd Qty: 10.00

\*10\*

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

160

QC5- Inspect part completeness to step on W/O

0.00

DAS  
B21  
JS21

12

\*160\*

QC

Quality Control

170

Identify as per dwg & Stock Location:

0.00

Mel - 13/05/22 R  
(12)

\*170\*

Packaging

Packaging

Memo

0.00

\*\*\*IDENTIFY AS PER APICAL MPP-120 BY STAMPING THE P# AND  
REV\*\*\*

ST536

180

QC21- Final Inspection - Work Order Release

0.00

13/5/27 JJ

\*180\*

QC

Quality Control

Memo

0.00

MF  
13-5-22

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS														
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Part No. _____			Work Order Update <input type="checkbox"/>																	
NCR No. _____																				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description			Sign & Date	Verification	QC Inspector								
Doc/Data																				
Equip/Tooling																				
Operator																				
Material																				
Setup																				
Other																				
Process																				
Supplier																				
Training																				
Unapproved																				
FAULT CATEGORY																				
Landing Gear	General																			
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>				Ovalized <input type="checkbox"/>					Pressure/Forced <input type="checkbox"/>								
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>				Over/Under tolerance <input type="checkbox"/>					Temperature/Cure <input type="checkbox"/>								
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>				Part Incorrect <input type="checkbox"/>					Weld <input type="checkbox"/>								
	Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>				Part Lost/Missing <input type="checkbox"/>					Wrong Stock Pulled <input type="checkbox"/>								
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>				Part Moved <input type="checkbox"/>													
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>				Positioned Wrong <input type="checkbox"/>													
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>				Power Loss/Surge <input type="checkbox"/>													
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>																	
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>																	
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>																	
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>																	

**Picklist Print**

April-11-13 3:34:55 PM

Page 1

Work Order ID: 99775

**\*99775\***  
**\*646 3911\***

Parent Item: 646.3911

Parent Item Name: Shim

Start Date: 5/24/13

Required Date: 5/24/13

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP REV:A 12.10.23 NEW ISSUE DD VERF:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MC1095S.032		Purchased	No			110	sf	9.5000	0.03	0315789	**	65	JM13-4-19

**\*MC1095S 032\***  
C1095 Blue Tempered Spring Steel Sheet .032

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT022	9.5	
123537	9.5	123537

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order:			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____ NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <hr/> <hr/> <hr/>	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <hr/> <hr/> <hr/>

DART AEROSPACE LTD	Work Order:	99775
Description: Shim	Part Number:	646.3911
Inspection Dwg: 646.3900 Rev: N/C		Page 1 of 1

# FIRST ARTICLE INSPECTION CHECKLIST

17

Measured by:	JM	Audited by:	27 29	Preliminary Approval:	
Date:	13-4-19	Date:	13-4-19	Date:	

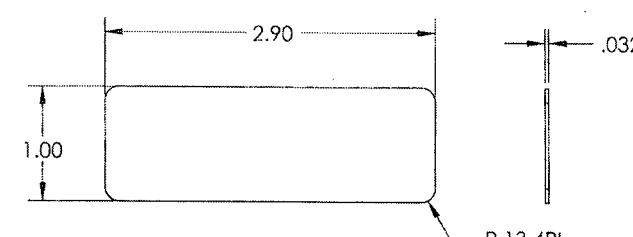
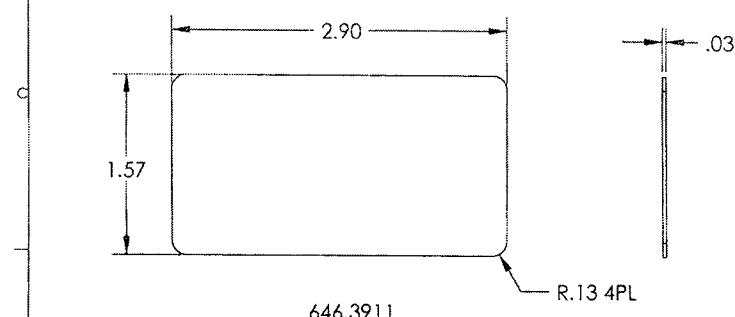
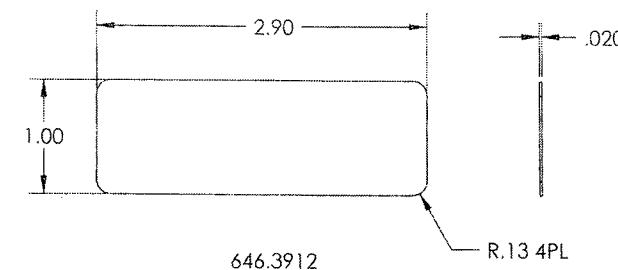
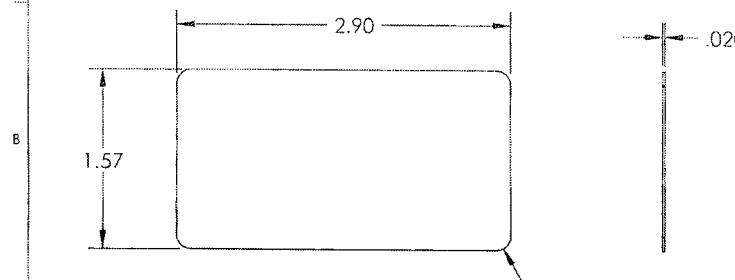
Rev	Date	Change	Revised by	Approved
A	12.11.30	New Issue	KJ	<i>[Signature]</i>

NOTES:

△ MATERIAL: SHIM STOCK, C1095 BLUE-TEMPERED SPRING STEEL

△ FINISH: CAD PLATE PER QQ-P-416 TYP II CL2

3. IDENTIFY IAW MPP-120



		646.3913	SHIM	△	△	
		646.3912	SHIM	△	△	
		646.3911	SHIM	△	△	
		646.3910	SHIM	△	△	
	FIND #	PART #	DESCRIPTION	MAT'L	SPEC.	
			PARTS LIST			
QTY	TOP PNL (14)					
	IMCD-A-VR					
	PROJ. NO.					
	DRWSTY					
	REV					
	646.4000					
	1					
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Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO19639**

Purchase Order Date 4/19/2013  
PO Print Date 4/23/2013

Page Number 1 of 1

Order From : VC-CAD002

CADORATH COATING  
2150 LOGAN AVE.  
WINNIPEG, MB R2R 0J2  
CA

Contact Name	Buyer	Brigitte Golden
Vendor Phone	Requisition Nbr	
Vendor Fax	Tax Resale Nbr	10127-2607
Vendor Account Nbr	Terms	Net 30
	Currency	CAD
	FOB	Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

FAXED  
04/23/2013

Line Nbr	Reference Revision ID	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	99658	646.3910 Shim	5/3/2013	21.00 Yes	FedEx PI collect	\$7.1900	\$150.99

Special Inst: Finish: Cad Plate per QQ-P-416  
Type II CL2

2	99775	646.3911 Shim	5/3/2013	12.00 Yes	FedEx PI collect	\$7.1900	\$86.28
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Special Inst: Finish: Cad Plate per QQ-P-416  
Type II CL2

PO Total: \$237.27

Change Nbr: 2

Change Date: 4/23/2013

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required - YES NO

# Packing Slip

**Sold To:**

Dart Aerospace Ltd.  
1270 Aberdeen St.

Hawkesbury, ON K6A 1K7

**ShipTo:**

## Cadorath Coating

2150 Logan Avenue, Winnipeg, Manitoba R2R-0J2

**Phone:** (204) 633-9420 **Fax:** (204) 633-8033

**INVOICE NUMBER:**

**S 66018**

Net 2% Interest Per Month charged on Overdue Accounts.

Any claims for shortages, overcharges, or damaged goods must be made within seven (7) days from receipt of goods.

Customer Order #:	Date Received:	Terms:	G.S.T. #:	Ship Via:	Ship Date:
PO19639	Apr-23-2013	NET 30 DAYS	10071 6547 RT0001		May-16-2013

**Item # Qty P/N & Description**

1	21 EA	SHIM P/N 646.3910	S/N 99658 W/O 124245
2	12 EA	SHIM P/N 646.3911	S/N 99775 W/O 124246

CERTIFICATE OF  
CONFORMANCE

CADORATH PLATING CO. LTD.  
2150 LOGAN AVENUE  
WINNIPEG, MANITOBA R2J-0J1

DATE: May-16-2013

CONSIGNMENT TO: Dart Aerospace Ltd.  
1270 Aberdeen St.  
Hawksbury, ON K6A 1K7

W/O #: 124246  
INVOICE #: 66018

CONTRACT OR  
PURCHASE ORDER # PO19639

DESCRIPTION: SHIM QTY 12

P/N # 646.3911 S/N # 99775

CADMUM PLATING IAW AMS-QQ-P-416C TYPE 2 YELLOW CLASS 2.  
BAKE HEAT CHART # 13-437 AND # 13-447.

**CERTIFICATE:** I certify that the items indicated hereon have  
been inspected and tested and conform to all specifications  
and requirements detailed on the contract or purchase order.

CL  
22

Approved Inspector: